OWNER / OPERATOR RESPONSIBILITIES
AND SPECIFICATIONS COVERSHEET

Prepared for: Business Name: _____

Client Name: _____ ☐ Owner   ☐ Operator

Farm #: _____   Tract #: _____   Field #: _____

Prepared by: Name / Title: _____   Date: _____

I. PRACTICE REQUIREMENTS

The following table indicates the documents which will be provided to the client in order to properly install, operate, and maintain the planned conservation practice(s). Special or other requirements are listed below the table.

Practice (name and code)	Documents				
	Jobsheet	Specification	Drawing, Map, etc.	Operation & Maintenance Guide	Other (name)

Special or Other Requirements:

_____

II. BUSINESS OWNER / OPERATOR RESPONSIBILITIES

It is the responsibility of the business owner / operator to:

- review the practice requirements as indicated in Section I and have an understanding of them;

- install, operate, and maintain the conservation practice(s) in accordance with the practice requirements for the life of the practice(s);

- make no changes to the installation, operation, and maintenance of the conservation practice(s) as specified in the practice requirements, without prior written approval of the Natural Resources Conservation Service (NRCS);

- obtain all necessary permits and/or rights, and comply with all ordinances and laws pertaining to the installation, operation, and maintenance of the conservation practice(s), prior to the start of installation; and

- assume responsibility for notifying all utilities affected by the installation, operation, and maintenance of the conservation practice(s).

III. BUSINESS OWNER / OPERATOR ACKNOWLEDGMENT

I, the business owner / operator, agree to carry-out my responsibilities as specified above in Section II of this Coversheet.

/s/ _____   Date _____
                 (Business Owner / Operator)

IV. REVIEW WITH BUSINESS OWNER / OPERATOR

I have reviewed with the business owner / operator, the practice requirements and their responsibilities.

/s/ _____   Date _____
                 (NRCS Personnel and Title)

/s/ _____   Date _____
          (Conservation District Chairperson - Optional))